



Express Mail Label Number EV 337 973 246 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Pre. #22
50623.126
Amold B
S. Bryce
2/18/04

Re Application of:

Examiner: Thomas C. Barrett

Daniel Castro et al.

Serial No.: 09/583,327

Art Unit: 3738

Filed: May 31, 2000

Title: (As Amended) A Method of Coating a Prosthesis

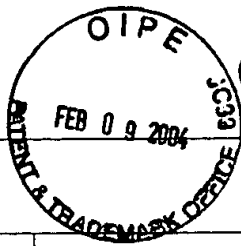
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Dear Examiner Barrett:

This response and the accompanying Request for Continued Examination address the Office Action mailed on September 10, 2003, which had a shortened statutory period for response that ended on December 10, 2003. The enclosed petition request a two-month extension of time, extending period to respond to February 10, 2004.

RECEIVED
FEB 17 2004
TECHNOLOGY CENTER R3700

**AMENDMENT TRANSMITTAL LETTER** (Large Entity)

Docket No. 50623.126

Applicant(s): Daniel Castro et al.

Serial No. 09/583,327

Filing Date: May 31, 2000

Examiner: Thomas C. Barrett

Group Art Unit 3738

Invention: (As Amended) A Method Of Coating A Prosthesis

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.


The fee has been calculated and is transmitted as show below.

CLAIMS AS AMENDED

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
|--|-------------------------------------|-----------------------------|--------------------------------|-----------|----------------|
| TOTAL CLAIMS | 37 | 60 | 0 | X \$18.00 | \$ 0.00 |
| INDEP. CLAIMS | 3 | 3 | 0 | X \$86.00 | \$ 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$00.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$ 0.00 |

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. **07-1850** in the amount of \$
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. **07-1850**
A duplicate copy of this sheet is enclosed.
- ☐ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 C.F.R. 1.17.

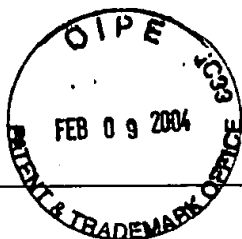
Dated: February 9, 2004
 Squire, Sanders & Dempsey L.L.P.
 1 Maritime Plaza, Suite 300
 San Francisco, CA 94111
 (415) 954-0200


 Paul J. Meyer, Jr.
 Reg. No. 47,791

cc: Docket

RECEIVED**FEB 17 2004**

TECHNOLOGY CENTER R3700



FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$1,190.00)**

Complete if Known

Application Number **09/583,327**
Filing Date **May 31, 2000**
First Named Inventor **Daniel Castro**
Group Art Unit **3738**
Examiner Name **Thomas C. Barrett**
Attorney Docket Number **50623.126**

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to:

- ☒ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.[†]
- ☐ Applicant claims small entity status. See 37 CFR 1.27.

Deposit Account Number: 07-1850
Deposit Account Name: Squire, Sanders & Dempsey

A Duplicate Copy of this authorization is attached

2. ☐ Payment Enclosed:
[] Check [] Other

FEE CALCULATION (fees effective 10/1/01)

1. FILING FEE

| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due |
|------------------------------|------------------------------|--------------------|----------------------|
| 101/\$740 | 201/\$370 | Utility Filing | <input type="text"/> |
| 106/\$330 | 206/\$165 | Design Filing | <input type="text"/> |
| 108/\$740 | 208/\$370 | Reissue | <input type="text"/> |
| 114/\$160 | 214/\$80 | Provisional Filing | <input type="text"/> |
| SUBTOTAL (1) | | | (\$ 0) |

2. CLAIMS

| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description |
|------------------------------|------------------------------|---|
| 103/\$18 | 203/\$9 | Claims in excess of 20 |
| 102/\$84 | 202/\$42 | Independent claims in excess of 3 |
| 104/\$280 | 204/\$140 | Multiple dependent claim |
| 109/\$84 | 209/\$42 | Reissue independent claims over original patent |
| 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original Patent |

3. ADDITIONAL FEES

| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due |
|------------------------------|------------------------------|--|----------------------|
| 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | <input type="text"/> |
| 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | <input type="text"/> |
| 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | <input type="text"/> |
| 115/\$110 | 215/\$55 | Extension for response within first month [†] | <input type="text"/> |
| 116/\$400 | 216/\$200 | Extension for response within second month [†] | 420 |
| 117/\$920 | 217/\$460 | Extension for response within third month [†] | <input type="text"/> |
| 118/\$1,440 | 218/\$720 | Extension for response within fourth month [†] | <input type="text"/> |
| 128/\$1,960 | 228/\$980 | Extension for response within fifth month [†] | <input type="text"/> |
| 119/\$320 | 219/\$160 | Notice of Appeal | <input type="text"/> |
| 141/\$1,280 | 241/\$640 | Petition to revive unintentionally abandoned Application | <input type="text"/> |
| 142/\$1,280 | 242/\$640 | Utility Issue Fee (Or Reissue) | <input type="text"/> |
| 143/\$460 | 243/\$230 | Design Issue Fee | <input type="text"/> |
| 122/\$130 | 122/\$130 | Petitions to the Commissioner | <input type="text"/> |
| 123/\$50 | 123/\$50 | Petitions related to provisional applications | <input type="text"/> |
| 126/\$180 | 126/\$180 | Submission of Information Disclosure Statement | <input type="text"/> |
| 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | <input type="text"/> |
| 146/\$740 | 246/\$370 | Filing a submission after final rejection (37 CFR 1.129(a)) | <input type="text"/> |
| 179/\$740 | 279/\$370 | Request for Continued Examination (RCE) | 770 |

Other fee (specify):

Other fee (specify):

SUBTOTAL (3) **(\$ 1,190)**

| (Col. 1) | | minus* | (Col. 2) | | = | (Col. 3) | | x | Fee | = | Fee Due |
|--|------------------------|--------|---------------------------------|--|---|----------|--|---|------|---|---------|
| For | No. of Existing Claims | | Highest No. Previously Paid For | | | Extra** | | | | | |
| TOTAL | 37 | | 20 or 60 | | | 0 | | | \$18 | | \$0 |
| INDEP | 3 | | 3 or 3 | | | 0 | | | \$86 | | \$0 |
| [] First presentation of multiple dependent claim | | | | | | | | | | | |

* Subtract the greater number of Col. 2

** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2) **(\$ 0)**

SUBMITTED BY

Typed or Printed Name

Paul J. Meyer, Jr.

Signature

RECEIVED

FEB 17 2004

Complete (if applicable)

Reg. Number

47,791

Date

February 9, 2004

TECHNOLOGY CENTER R3700